

Department of Health & Human Services
Centers for Medicare & Medicaid Services
61 Forsyth St., Suite 4T20
Atlanta, Georgia 30303-8909



September 25, 2009

Ms. Elizabeth A. Johnson
Commissioner
Cabinet for Health and Family Services
Department of Medicaid Services
275 East Main Street, 6W-A
Frankfort, Kentucky 40621-0001

Attention: Kevin Skeeters

RE: Kentucky Title XIX State Plan Amendment, Transmittal #09-005

Dear Ms. Johnson:

We have reviewed the proposed amendment to the Kentucky Medicaid State Plan that was submitted under transmittal number 09-005. This amendment allows for a disregard when an annual Social Security and Railroad Retirement COLAs and Federal Poverty Level COLA adjustments cause ineligibility for Medicaid. The disregard is for eligibility groups subject to Section 1902(a)(10)(E)(i) and 1902(a)(10)(E)(iii). This disregard continues until the individual loses Medicaid coverage for any other reason for three (3) consecutive months.

Based on the information provided, we are pleased to inform you that Medicaid State Plan Amendment 09-005 was approved on September 24, 2009. The effective date for this amendment is April 1, 2009. We are also enclosing the approved HCFA-179 and plan page.

If you have any questions or need any further assistance, please contact Maria Donatto at 404-562-3697 or Darlene Noonan at 404-562-2707.

Sincerely,

Mary Kaye Justis, RN, MBA
Acting Associate Regional Administrator
Division of Medicaid & Children's Health Operations

Enclosures

**TRANSMITTAL AND NOTICE OF APPROVAL OF
STATE PLAN MATERIAL**

1. TRANSMITTAL NUMBER:
09-005

2. STATE
Kentucky

FOR: HEALTH CARE FINANCING ADMINISTRATION

3. PROGRAM IDENTIFICATION: TITLE XXI OF THE
SOCIAL SECURITY ACT (SCHIP)

TO: REGIONAL ADMINISTRATOR
HEALTH CARE FINANCING ADMINISTRATION
DEPARTMENT OF HEALTH AND HUMAN SERVICES

4. PROPOSED EFFECTIVE DATE
April 1, 2009

5. TYPE OF PLAN MATERIAL (Check One):

☐ NEW STATE PLAN ☐ AMENDMENT TO BE CONSIDERED AS NEW PLAN ☒ AMENDMENT

COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate Transmittal for each amendment)

6. FEDERAL STATUTE/REGULATION CITATION:
Section 1902(r)(2)

7. FEDERAL BUDGET IMPACT:
a. FFY 2009 - Budget Neutral
b. FFY 2010 - Budget Neutral

8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:

Att. 2.6-A Supplement 8a page 2

9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION
OR ATTACHMENT (If Applicable):

Same

10. SUBJECT OF AMENDMENT:

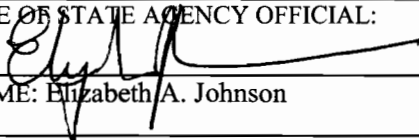
. This plan allows for a disregard when an annual Social Security and Railroad Retirement COLAs and Federal Poverty Level COLA adjustments cause ineligibility for Medicaid. The disregard continues until the individual loses Medicaid coverage for any other reason for three (3) consecutive months.

11. GOVERNOR'S REVIEW (Check One):

☐ GOVERNOR'S OFFICE REPORTED NO COMMENT
☐ COMMENTS OF GOVERNOR'S OFFICE ENCLOSED
☐ NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

X OTHER, AS SPECIFIED: Review delegated
to Commissioner, Department for Medicaid
Services

12. SIGNATURE OF STATE AGENCY OFFICIAL:



13. TYPED NAME: Elizabeth A. Johnson

14. TITLE: Commissioner, Department for Medicaid Services

15. DATE SUBMITTED: June 26, 2009

16. RETURN TO:

Department for Medicaid Services
275 East Main Street 6W-A
Frankfort, Kentucky 40621

FOR REGIONAL OFFICE USE ONLY

17. DATE RECEIVED:

06/29/09

18. DATE APPROVED:

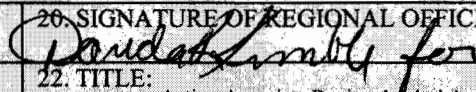
09/24/09

PLAN APPROVED - ONE COPY ATTACHED

19. EFFECTIVE DATE OF APPROVED MATERIAL:

04/01/09

20. SIGNATURE OF REGIONAL OFFICIAL:



21. TYPED NAME:

Mary Kaye Justis, RN, MBA

22. TITLE:

Acting Associate Regional Administrator
Division of Medicaid & Children's Health Opns

23. REMARKS:

Approved with following changes as authorized by State Agency on email dated 09-14-09:

Block # 8 Attachment 2.6-A Supplement 8a page 2: **CHANGED TO READ:** Attachment 2.6-A Supplement 8a page 2a

Block # 9 Same: **CHANGED TO READ:** New Page

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

LESS RESTRICTIVE METHODS OF TREATING INCOME
UNDER SECTION 1902 (r)(2) OF THE ACT

- X When the annual Social Security and Railroad Retirement COLAs and Federal Poverty Level COLA adjustments cause ineligibility for Medicaid, disregard the most recent Social Security/Railroad Retirement COLA increase. The disregard is for eligibility groups subject to Sections 1902(a)(10)(E)(i) & 1905(p), 1902(a)(10)(E)(iv) and 1902(a)(10)(E)(iii).

This disregard continues until the individual loses Medicaid coverage for any other reason for three (3) consecutive months.